



OHIO COUNTY OCCUPATIONAL TAX

EMPLOYER'S RETURN OF EMPLOYEE'S LICENSE FEE WITHHELD OR DUE

For Office Use Only

If "\$0" wages paid this period, enter "\$0" or "NONE" and return the form

1. Salaries, wages, commissions & other compensation paid all employees for services in Ohio County..... \$
2. Tax Due at 1.00% of line 1 (Line 1 x 1%) \$
3. Penalty 5.00% per mo. if past due (**Max 25% - Min \$25**) \$
4. Interest 12.00% per annum (1% monthly or fraction thereof)... \$
5. Adjustment due to: rounding, credit, etc.....(+/-)..... \$
6. BALANCE DUE.... (total of lines 2 thru 5)..... \$

Should this account be made inactive? ☐ NO ☐ YES, effective date _____
REASON: _____

I hereby certify that the information, schedules, statements and exhibits filed herewith are true and correct.

Signed _____ Date _____

Title _____ Phone Number (270) - _____

PAID BY CHECK # _____

Name: _____
Contact: _____
Street Address: _____
City: _____ KY 00000

Acct No.

00000

Indicate name or address change above.

FED ID / SS # _____

PERIOD ENDING

Month	Day	Year
12	31	2009

DUE ON or BEFORE

Month	Day	Year
01	31	2010

Make checks payable to and mail to:

OHIO COUNTY
OCCUPATIONAL TAX ADMINISTRATOR
P.O. BOX 185

HARTFORD KY 42347

Phone: (270) 298-4410 Fax: (270) 298-4409

lugenias@bellsouth.net
octaxclerk@bellsouth.net

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Return This Form To The Occupational Tax Office

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Form OCC-3PT Rev. 7/6/09